

Bureau of Professional Licensing PO Box 30670 ● Lansing, MI 48909 Telephone: (517) 241-0560 www.michigan.gov/bpl

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EDUCATIONAL LIMITED RENEWAL CERTIFICATION OF ADMITTANCE TO A MEDICAL POSTGRADUATE TRAINING PROGRAM

Authority: 1978 PA 368

Your license will not be renewed until we receive this information

Section of Form to be Completed by Applicant:		
Name (First, Middle, Last)		10-Digit MI Permanent ID/License Number
Hospital Name or Institution		
Hospital or Institution Street Address		
City	State	Zip Code
Program Name	Program Start Date	
I am continuing my educational limited appointment in the same program at the same location as shown above		
Tam containing my cadeational immed appointment in the came program at the came recation as one will above		
I am continuing my educational limited appointment, but will transfer to a new program as shown above		
Cignotive of Director of Medical Education		Date
Signature of Director of Medical Education		Date